## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

as

			0. <u>F.H.R.</u> (0.	1) 270 2000			
INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifica	s form should be used correspondence includi- ted below or directed of ations.	for transmitting the ISS ng the Patent, advance of herwise in Block 1, by (	UE FEE and PUBLICAT rders and notification of a a) specifying a new corre				
CURRENT CORRESPONE	Not Fee pap hav	Note: A certificate of mailing can only be used for domestic mailings of it Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mu have its own certificate of mailing or transmission.					
Striker Striker 103 East Neck I Huntington, NY	I he Star add tran	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelop addressed to the Mail Stop ISSUE FEE address above, or being facsimit transmitted to the USP10 (37) 275-2885, on the date traditional below.					
							(Depositor's name
							(Signature
							(Date
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.			CONFIRMATION NO.
10/541,104 06/30/2005			Juergen Schmenger		3321		4931
TILE OF INVENTION	E DYE-CONTAINING	PELLETS FOR DYEING	KERATIN FIBRES				
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE TO	OTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0		\$1740	11/26/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS	]			
ELHILO, EISA B		1796	008-405000	J			
FR 1.363).  Change of corresp Address form PTO/SI  "Fee Address" ind PTO/SB/47; Rev 03-( Number is required.  ASSIGNEE NAME A	ND RESIDENCE DATA less an assignce is ident h in 37 CFR 3.11. Comp	2. For printing on the pattern front page, list (1) the names of up to 3 registered pattern attorneys or agents OR, alternatively.  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered potent attorneys or agents. If no name is listed, no name will be printed.  THE PATENT (print or type) data will appear on the patent. If an assignment of a substitution for filling an assignment.  (8) RESIDENCY (CITY and STATE OR COUNTRY)					
WELLA AG  Darmstadt, Germany  lease check the appropriate assignee category or categories (will not be printed on the patent):							
a. The following fee(s) are submitted:  \$\frac{4b}{\text{Psyment of Fee(s)}}\$ (\text{Please first reapply any previously paid issue fee shown above)} \\ A check is enclosed.  \$\frac{1}{\text{Psyment of Fee(s)}}\$ (\text{Please first reapply any previously paid issue fee shown above)} \\ A check is enclosed.  \$\frac{1}{\text{Psyment of Fee(s)}}\$ (\text{Please first reapply any previously paid issue fee shown above)} \\ A check is enclosed.  \$\text{Psyment of Fee(s)}\$ (\text{Please first reapply any previously paid issue fee shown above)} \\ A check is enclosed.  \$\text{Psyment of Fee(s)}\$ (\text{Please first reapply any previously paid issue fee shown above)} \\ A check is enclosed.  \$\text{Psyment of Fee(s)}\$ (\text{Please first reapply any previously paid issue fee shown above)} \\ A check is enclosed.  \$\text{Psyment of Fee(s)}\$ (\text{Please first reapply any previously paid issue fee shown above)} \\ A check is enclosed.  \$\text{Psyment of Fee(s)}\$ (\text{Please first reapply any previously paid issue fee shown above)} \\ A check is enclosed.  \$\text{Psyment of Fee(s)}\$ (\text{Please first reapply any previously paid issue fee shown above)} \\ A check is enclosed.  \$\text{Psyment of Fee(s)}\$ (\text{Please first reapply any previously paid issue fee shown above)} \\ A check is enclosed.  \$\text{Psyment of Fee(s)}\$ (\text{Please first reapply any previously paid issue fee shown above)} \\ A check is enclosed.  \$\text{Psyment of Fee(s)}\$ (\text{Please first reapply any previously paid issue fee shown above)} \\ A check is enclosed.  \$\text{Psyment of Fee(s)}\$ (\text{Please first reapply any previously paid issue fee shown above)} \\ A check is enclosed.  \$\text{Psyment of Fee(s)}\$ (\text{Please first reapply any previously paid issue fee shown above)} \\ A check is enclosed.  \$\text{Psyment of Fee(s)}\$ (\text{Please first reapply any previously paid issue fee shown above)} \\ A check is enclosed.  \$\text{Psyment of Fee(s)}\$ (\text{Please first reapply any previously paid issue fee shown above)} \\ A check is en							
a. Applicant claim	tus (from status indicates s SMALL ENTITY state	s. See 37 CFR 1.27.	☐ b. Applicant is no long	ger claiming SMAL	L ENTITY	status. See 37 CF	R 1.27(g)(2).
OTE: The Issue Fee an iterest as shown by the i	d Publication Fec (if requeened of the United Sta	aired) will not be accepted tes Patent and Trademark	I from anyone other than the Office.	ne applicant; a regis	stered attorn	ey or agent, or the	assignee or other party i
Authorized Signature Date 10/24/2008							
Typed or printed name Michael J. Striker Registration No. 27233							

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confloctation is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and the confloctation of the complete confloctation in the confloctation of the c

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.